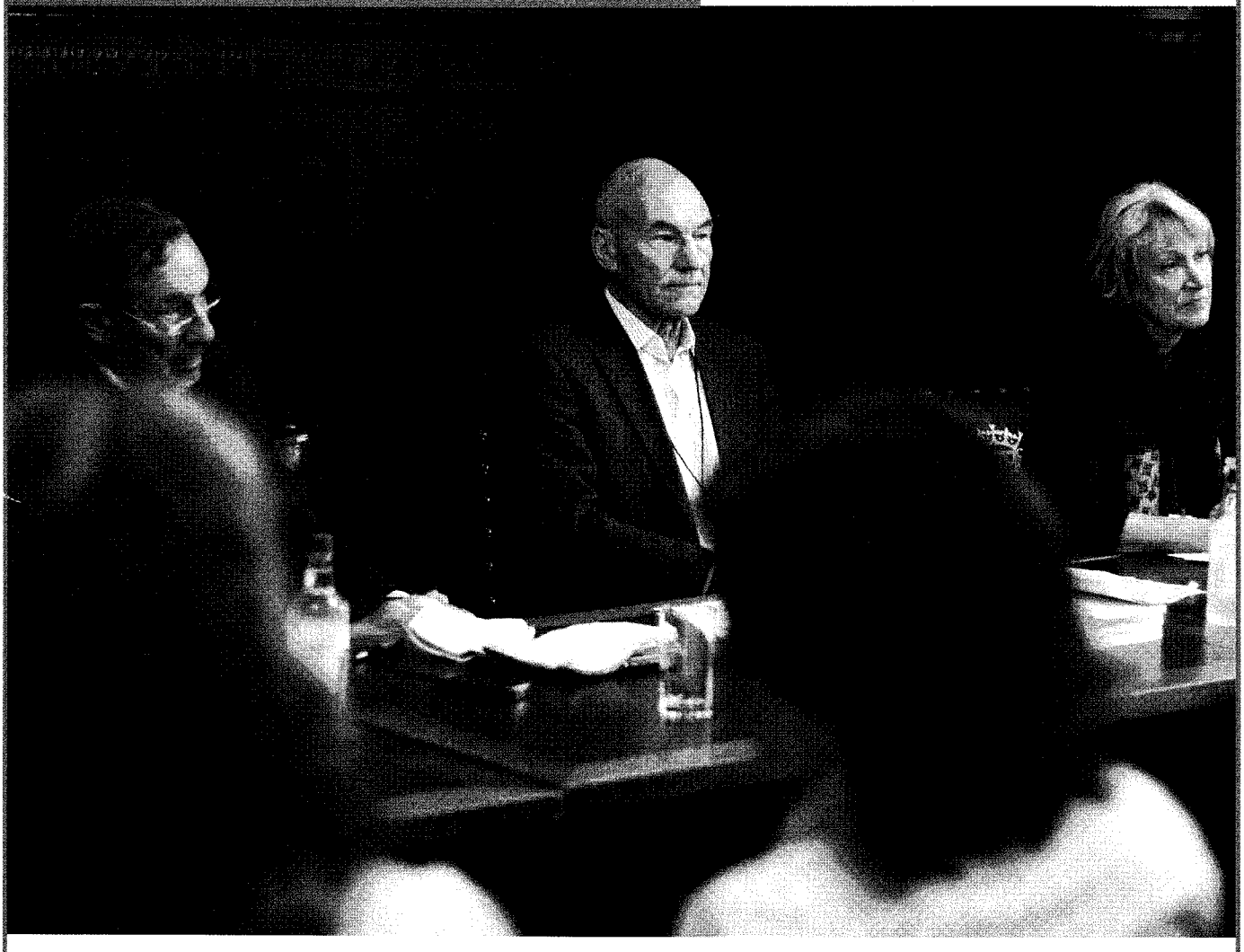
Dignity in dying

Campaign

for choice, for compassion, for change

Issue 8 Autumn 2011



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Patrons Reverend Professor Paul Badham • Roy Bailey • Professor Eric Bolton CB • Jo Brand • Chris Broad • Rosemary Brown OBE • Sir John Burgh • Carmen Calil • Kim Cattrall • Lesley Close • Jasper Conran • Howard Devoto • Nell Dunn Sir Terence English KBE FRCS • Brenda Fricker • Professor Anthony Grayling • Susan Hampshire • The Rt Hon Patricia Hewitt Sir Michael Holroyd CBE • Dame Elisabeth Hoodless DBE • Lord Joel Joffe CBE • Dr Liza Macdonald • Kenan Malik • Ian McEwan Diana Melly • Rabbi Charles Middleburgh • Sir Jonathan Miller CBE • Deborah Moggach • Dr Michael O'Donnell • Sophie Pandit Sir Terry Pratchett OBE Heather Pratten • Brian Pretty • Nick Ross • Dame Ruth Silver • Sir Patrick Stewart •Janet Suzman Professor Ray Tallis • Zoe Wanamaker CBE • Simon Weston OBE • Professor Lewis Wolpert • A.N. Wilson • Matthew Wright

About Dignity in Dying

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Who we are

Dignity in Dying is a national campaign and membership organisation. With 25,000 supporters we work to alleviate suffering at the end of life by campaigning for greater choice, control and access to services.

What we want

We want everyone to have what they consider to be a good death, including the option of assisted dying for terminally ill, mentally competent adults.

We believe that everyone has the right to a dignified death, free of avoidable suffering.

This means

Choice over where we die, who is present and the treatment we receive.

Access to expert information on our options, good quality end-of-life care and support for our loved ones and carers.

Control over how we die, our treatment and pain relief, and planning our own death.

What we do

We lobby Parliament, keep assisted dying and end-of-life care in the media spotlight, advise people on their end-of-life rights, and represent terminally people who want the choice of an assisted death by ensuring that their voices are heard.

How you can help

Join us! We are funded entirely by our supporters and are independent of any political, religious or other organisation. If you're not already a member of Dignity in Dying you can join us from as little as £20 per year. If you have previously been a member then please continue your support and don't forget to renew your membership. Other practical ways to support the campaign can be found in this newsletter and on our campaign website: **www.campaignfordignityindying.org.uk**

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Online

Please note that not all views expressed in Campaign are necessarily those of Dignity in Dying.

Chief Executive

It has been a busy few months for the campaign.

We had an active party conference season with events at all major party conferences. There were excellent contributions from our political supporters and it was great to see so many friendly faces - a big thank you to all who attended. We are already planning similar events for next year's party conferences.

In October the Parliamentary group supported by Dignity in Dying held an event in Parliament. Speakers included our patron Sir Patrick Stewart, Belgian palliative care specialist Prof. Jan Bernheim, and president of Compassion & Choices in the US, Barbara Coombs Lee. The event was well attended and there was an informed and lively discussion. You can read about it on page 6.

Our colleagues at Healthcare Professionals for Assisted Dying (HPAD) held their inaugural conference, with Prof. Ray Tallis delivering the first Dr Ann McPherson CBE Memorial Lecture. HPAD membership is growing rapidly, already over the 500 mark. If you are a healthcare professional, or know one who is supportive, please find out more at www.hpad.org.uk. The highlights of Ray's speech are on page 10.

The next 12 months are set to be even more eventful. The Commission on Assisted Dying is due to report towards the end of 2011, drawing conclusions on the need for change. We then intend to secure debates on assisted dying in Parliament with the help of our Parliamentary supporters. It's remarkable that there hasn't yet been substantial debate on the Director of Public Prosecutions' guidelines, which have effectively decriminalised amateur compassionate assistance to die. The silence of Parliament indicates politicians don't want to prosecute people for helping loved ones to die at their request, but the majority of the public think Parliament should clarify in statute which acts are criminal and which are not.

To build on the excellent work of supporters to engage MPs, in May next year we'll hold a mass lobby of Parliament. It's really important to get as many members as possible to come and speak to MPs. More information is on page 7.

Finally, I'd like to thank you for your loyal support through 2011. We couldn't survive without your help. It's been a difficult year for Dignity in Dying financially, and I am obliged to ask for your help again - if you are able to give it - in the form of the enclosed appeal. Please give if you can - we want to make 2012 a landmark year and we need your help to do it.

Sarah Wootton

Mylinh Cao
Press Trainee

Patrick Callaghan
Social Media & Campaigns Trainee

Philip Satherley
Research & Policy Officer

Rachel Watt
Finance Officer

Sarah Wootton
Chief Executive

Tomasz Wlodarczyk
Director of Strategy, Operations & Fundraising

Victoria Holloway
Parliamentary Support Officer

Why I campaign

We recently launched a series of blogs on "why I campaign" for our new campaign website (www.campaignfordignityindying.org.uk). This article originally appeared on the blog; Scottish member and former doctor Chris Ward explains what the campaign means to him and the importance of good quality palliative care:

The name Dignity in Dying indicates that palliative care should be more widely available to ensure a peaceful dignified death for all terminally patients. I suspect that most people who know of the organisation are more aware of the issues related to assisted dying than they are of the consequences and causes of the limitations of palliative care services in general.

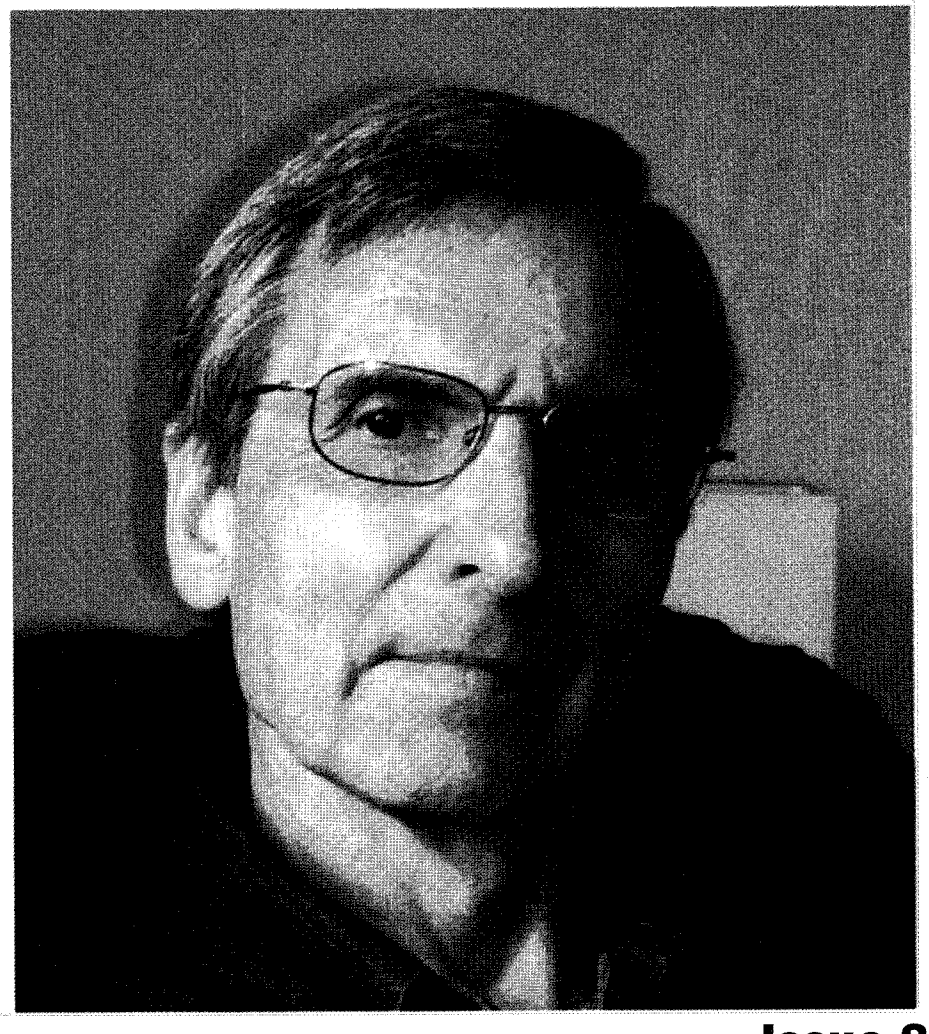
During the 40 plus years that I worked as a doctor in an NHS hospital I saw terminally ill and dying patients for whom palliative care provided an improved quality of life and a pain free, peaceful and dignified death. But I also saw others whose care was very poor. Why wasn't it available for everyone who needed it?

Palliative care in the UK is second to none and excellent strategies for improved provision have been published in both England and in Scotland. As a result, more patients and their family/carers are now "taken on board" by a palliative care team from the time their condition is diagnosed until they die: They have physical, psychological and social support and access to financial support is identified; they have a peaceful and dignified death and are increasingly enabled to die in their own homes. But this still only applies to a minority of patients. Palliative care has historically been provided exclusively for cancer patients and remains so to a large extent – and significant numbers of these also miss out.

Patients lacking this support are often ill informed about their diagnosis and treatment, lack social support and, when close to death, have inadequate help to die peacefully: the situation is improving but only slowly.

There are several reasons for this disparity; patchy implementation at the local level of published guidelines, a shortage of qualified palliative care staff, inadequate training courses to enable non-palliative

Dignity in Dying member Chris Ward



care doctors and nurses to acquire basic palliative care skills and the non-involvement of many senior doctors in the care of the dying. To some doctors, dying indicates a medical failure which is resisted by continuing "active" treatment as opposed to providing palliative end-of-life care. This is a well documented, ongoing problem.

Poor doctor/patient communication is another common contributing factor: Most patients wish to know the details of their condition, their outlook and their treatment options and may become anxious or depressed if this doesn't happen. But many doctors avoid doing so, ostensibly because it would cause "upset." The fact is, many lack the necessary communication skills, and/or are disinclined to address "painful" end-of-life issues with their patients. This is recognised by the British Medical Association and the General Medical Council in publications which recommend that all doctors should acquire the necessary communication skills to do this: It hasn't yet happened, although such skills are now taught in medical school.

Good palliative care allays the fears and anxieties of most of those for whom it is available but it is widely recognised that even at its best, for a small number it fails to provide the autonomy and peace of mind they need in order to die peacefully in the place and at a time of their choosing.

As I see it, palliative care can provide for the many what assisted dying could offer for a few: They are equally important but the means of achieving them are quite different. In terms of a strategy, one size does not fit all.

Twenty five years ago a now retired palliative care consultant wrote; "The terminally ill fear the unknown more than the known, professional disinterest more than professional ineptitude, the process of dying more than death itself." Dignity in Dying addresses these concerns.

Read other campaigners' thoughts on why they campaign at www.campaignfordignityindying.org

ACTION! DO YOU HAVE A PERSONAL EXPERIENCE?

We are putting together a bank of supporters' individual experiences and we would like to hear from people who feel able to share their experiences of a loved one being sedated before death, or who died on the Liverpool Care Pathway. If you have an experience you can share, good or bad, please write to Anna Boehm at Dignity in Dying, telling us what happened, how you felt about it, and why the doctor told you they chose to sedate. You can also email Anna at **Anna.Boehm@dignityindying,org.uk**. We are also happy to hear from people with more general personal experiences. If you have a personal experience that you can share please contact Mylinh Cao on **Mylinh.cao@dignityindying.org.uk.**

The view from Westminster

By Victoria Holloway,
Parliamentary Support Officer

This year Dignity in Dying held fringe events at Green, Liberal Democrat, Labour and Conservative Party Conferences where we debated the difference between assisted dying and assisted suicide, 50 years on from the Suicide Act (an issue covered in the last edition of Campaign).

For some, conferences mean reams of policy initiatives and rating leaders' speeches. For us they provide a unique opportunity to engage with parliamentarians and "grass roots" activists.

With resounding support from attendees the events were a great success. We had excellent line-ups of speakers including: MPs Caroline Lucas, Julian Huppert, William Bain and Richard Ottaway, Peers Baroness Royall and Lord Dubs, MEP Chris Davies, Patron Sophie Pandit, campaigners Debbie Purdy and Robert Hayward, and our Chief Executive Sarah Wootton. Our panellists gave informed and, at times, very moving accounts of their views on the campaign.

At each event I was struck by the calm and rational discussions and the intelligent questions from the floor. One delegate in particular stood out for me, he said "I came here disagreeing with you and after what has been said I now fully support what you're asking for." He, and many others, took membership forms before leaving. Now, more than ever, I believe with our supporters we will get there - and it'll be sooner than many people think.

All Party Parliamentary Group

"The mark of a civilised society" was how actor and Dignity in Dying Patron, Sir Patrick Stewart, described Assisted Dying laws at a recent event in the Houses of Parliament. He had just brought the room to the brink of tears with a powerful and deeply moving story about his friend's wife who, suffering from terminal cancer, had taken her own life.

Whilst Sir Patrick gave a personal perspective, his fellow speakers gave a factual overview of their experience of Oregon and Belgium where assisted dying has been legalised. Veteran US campaigner Barbara Coombs Lee spoke about the practical results of the Death With Dignity Act in Oregon which has empowered patients - giving them greater choice and the reassurance that they can take control if they need to. Professor Jan Bernheim (who also spoke at the HPAD conference - see page 10) explained that the Belgian experience showed "after years of intense study there is no evidence of the slippery slope".

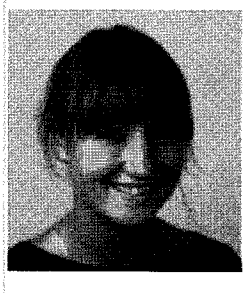
The room was full to capacity and the mood of the audience was palpable - everyone was thinking the same thing: "something has to be done". When the audience started asking questions it was clear that this was a room ready for action. People were talking about campaigns, about tactics, about Members of Parliament and the legislative process. Chair of the All Party Group, Penny Mordaunt MP, recognised the need for urgent action, noting that the issue had been "in Parliament's 'too tough' in-tray for too long". One of the MPs present, visibly moved, was inspired to pledge greater support for law change. Combined, the emotional story of a preventable tragedy and the factual accounts of systems that work so much better than ours had given those present a new determination to challenge the status quo and think about how we can help people like Sir Patrick's friend's wife, who clearly need it so much.

Mass Lobby of Parliament – an Appeal

Our work in recent months has laid the groundwork politically for the next 12 months when we'll be ramping up activity. Our next major event will be a mass lobby of Parliament, held on 16 May to coincide with the AGM.

Members from across the country will come to the Houses of Parliament to meet MPs face to face to discuss why a change in the law is necessary. Don't worry if the idea of going to Parliament to speak to your MP sounds daunting: before going in you will get a "how to lobby" workshop and be matched with other members from your constituency. All lobbying materials will be provided and, for those coming from further afield, we aim to organise some shared transport where there is enough demand.

The day will begin with the AGM, including a report from the Chair, Treasurer and Chief Executive and the results of the board election. We will then head to Parliament, stopping for a short demonstration outside for press photos and interviews. Inside, members will meet politicians and attend an event with high-profile speakers from amongst our patrons and MPs.



Our new Membership and Campaigns Officer, Jennifer Keen, is the point of contact for members here at Dignity in Dying HQ and is orchestrating the lobby day in May. Here she tells us a little bit about herself and her role at Dignity in Dying.

When and why did you join Dignity in Dying?

I joined in mid-September since when I've been settling in, getting to know the members. I've been really struck by the enthusiasm of everyone I've spoken to so far – it's clear that the campaign's biggest strength is its supporters!

I've always felt strongly about assisted dying – it's hard to believe that today our laws are still so out of date. I'm really pleased to be involved and it's great to be working on such an important and worthwhile campaign.

Can you tell us a bit about yourself?

My background is in politics and political communications, and I'm hoping to bring some of that expertise to the new role. My experience of political campaigning means I'm keen to get members involved in some of the more political stuff that we do. I've organised mass lobbies of Parliament for membership organisations before so I thought it would be a great addition to our influencing strategy for 2012.

Tell us more about the lobby day...

I've already had some great feedback from members about progress they've made with their MPs. The best way for a campaign to get MPs' attention is through the public as MPs have a duty to represent their constituents and hear their concerns. Not many people know this, but everybody eligible to vote has the right to enter Parliament and request a meeting with their MP. Of course sometimes they are not available, but it's common practice for them to meet with their constituents if they can.

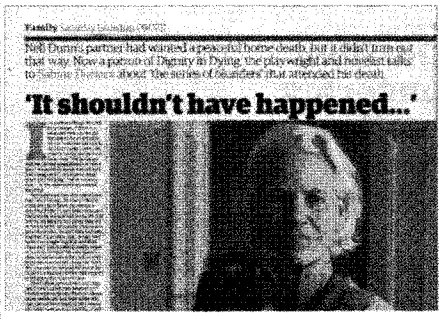
We hope to get very large numbers of DiD members to come to Westminster in the spring. This will raise awareness in Parliament as well as grab the attention of the media. Which is not to mention that it will be a great opportunity for members to come to Parliament, take part in our workshops, and maybe even meet some of our celebrity patrons...

ACTION! LOBBY YOUR MP IN PARLIAMENT

It's important that we have as many members in attendance on the day as possible. Please put the 16th May in your diaries! Contact Jennifer Keen at Jennifer.keen@dignityindying.org.uk or by phone on 0207 4797732 to let us know if you would like to attend.

News in brief

Patron activity


'It shouldn't have happened...'

In August Dignity in Dying proudly announced two new Patrons: the actors Susan Hampshire and Kim Cattrall. Patron Nell Dunn was featured in an exclusive interview in the Guardian in July. The playwright and author spoke of her experience caring for terminally ill husband Dan Oestreicher, and of her latest play Home Death, which follows several stories of death and dying.

Madeleine Sims

Dignity in Dying is very sad to inform members of the recent death of Madeleine Sims. Madeleine was a tireless champion of women's health issues, instrumental in the passing of the 1967 Abortion Law Reform Act, and a passionate supporter of Dignity in Dying. She died in October at the age of 81 and she will be remembered as a magnificent campaigner.

More support for a change in the law

In late August Martin Green, a Department of Health dementia expert and CEO of the English Community Care Association, spoke out in support of assisted dying. He argued that mentally competent patients should have control over all their health choices and called for Parliament to hold a free vote on the issue.

New personal stories in the media

Actor Chris Larner wrote and performed in one-man play An Instinct For Kindness at the Edinburgh Fringe Festival this August. The autobiographical play follows his experience accompanying ex-wife Allyson to Dignitas in 2010 and was very well received, winning a Fringe First Award. Heather

'Out of love I helped my son to die'

Pratten, Patron of Dignity in Dying, who helped her son Nigel to die in 2000, was featured in Yours Magazine in August, talking about the deaths of her husband and two sons from Huntington's disease. As part of 4Thought's series asking 'Is suicide a selfish act?' Sophie Pandit shared the story of her mother Dr Anne Turner's brave journey to Switzerland for an assisted death in 2006, and defended her mother's choice to exercise control at the end of her life.

New campaign hub website

With the launch of our new campaigning website we have seen a marked increase in member activity, with more letters written to MPs, more website-sharing with friends and more involvement in Dignity in Dying's new blog. Thanks to everyone involved! Visit the website to stay up to date and get involved with our current campaigns: www.campaignfordignityindying.org

50th Anniversary of the 1961 Suicide Act

The Suicide Act's 50th anniversary on the 3rd August saw widespread media coverage on assisted dying, with many letters and opinion pieces arguing in support of a change in the law. To mark the day Dignity in Dying published poll results showing that three quarters of people support assisted dying for terminally ill patients, whilst only a third of people support assisted suicide for non-terminally ill patients. Many thanks to all members who responded to

last newsletter's request and wrote to their local papers - we saw a clear increase in media activity and interest.

CPS figures on assisted suicide cases

In September the story that none of the 44 cases of assisted suicide that have been passed to the DPP since his guidelines were issued have been prosecuted drew significant media coverage. Chief Executive Sarah Wootton welcomed news of non-prosecution, but argued that an assisted dying law with upfront safeguards would provide far better protection for patients and their loved ones, many of whom have to endure lengthy criminal investigations. Director of Public Prosecutions Keir Starmer QC defended himself against accusations of a 'blanket non-prosecution policy', stating in a Times' opinion piece that he personally oversaw and judged each case individually.

International news

Momentum is building in a revived campaign to legalise assisted dying (or physician aid-in-dying) in the American state of Massachusetts. Campaigners hope to introduce a bill in the state legislature next year to mirror the Death with Dignity Acts already in place in Oregon and Washington. Polls consistently show overwhelming support and campaigners are optimistic that the bill will pass into law.

Compassion in Dying - Advance Decisions on The One Show

Chief Executive Sarah Wootton and Dignity in Dying member Joy Tomkins appeared on BBC1's The One Show in September to discuss the law on the refusal of medical treatment and how to make your treatment wishes clear in DNR notices or legally binding Advance Decisions.

The Case of M

The sad case of M struck a chord with many people when it appeared in the news at the end of September. M was left brain damaged by a virus and is now in a minimally conscious state. Her family applied to the courts to have her artificial nutrition and hydration withdrawn, but this was turned down because the judge had no way of knowing if this was M's wish

This was a very difficult case, but the fact is that if you feel strongly that you would not want life-prolonging treatment if you became minimally conscious, you have the legal right to refuse medical treatment in advance with an Advance Decision or Lasting Power of Attorney. If you have already made an Advance Decision, you can update it to include treatment you would want to refuse if you were minimally conscious. If you would like more information about making or updating an Advance Decision or making a Lasting Power of Attorney, contact Compassion in Dying's free Information Line - 0800 999 2434.

ADVERTISEMENT

Board Election 2012

No one should suffer against his or her wishes at the end of life.

Help end unnecessary suffering by applying to join the Dignity in Dying Board. There is one vacancy on the Board to begin in May 2012. We are looking to drive our campaign forward by electing a Director from within the membership.

If you have the time and energy to offer your skills and knowledge we would be delighted to hear from you.

We are particularly keen to hear from members with political, market research or commercial experience but do get in touch if you feel you can add value in other areas. We welcome applications from disabled members, from those with religious faith and those without.

80% of the British public agrees that terminally ill, mentally competent adults should have the right to choose an assisted death. Help translate this support into parliamentary action.

For an application pack, or for further details, please contact Ian Walker, Office Manager, Dignity in Dying, 181 Oxford Street, London, W1D 2JT or telephone 020 7479 7730 or email ian.walker@dignityindying.org.uk (please reference Board 2012)

Final date for applications is 19 December 2011.

HPAD Conference

The Dr Ann McPherson CBE Memorial Lecture

Healthcare Professionals for Assisted Dying held their inaugural conference in October. The speeches were informative, heartfelt and moving. Prof. Emily Jackson gave a thorough exploration of the legality and ethics of the status quo versus a potential change in the law. Prof. Clive Seale's thought-provoking presentation on doctors' views on assisted dying was particularly enlightening. Prof. Jan Bernheim imparted his experience of the Belgian model of end-of-life decision making, describing how the synergy between palliative care and greater choice had led to an overall improvement in end-of-life care.

The day finished with Prof. Ray Tallis delivering the Dr Ann McPherson CBE Memorial Lecture. As well as chairing HPAD, Ray is a philosopher, poet and novelist, and was until recently a physician and clinical scientist. His speech reflected his great experience within and beyond medicine. He began by paying tribute to Ann, HPAD's first Chair, who sadly passed away in May, recognising her considerable achievements as a campaigner and a clinician.

Over the next half hour he deconstructed the arguments advanced by opponents of assisted dying. Expressing the hope that "rational argument, rather than pre-rational opinions, will win the day" one-by-one he considered and dismissed the "factoids" used by the opposition. He dispelled the myth that assisted dying legislation would reduce quality or availability of palliative care (it doesn't - as evidence from Oregon and Belgium shows). And he debunked the claim it would break down trust between patients and doctors (it won't - the Netherlands, with its far more liberal laws, has the best levels of trust in Europe).

He turned his attention to the principle which forms the foundation of much opposition to assisted dying. Examining the "inviolable" principle of the sanctity of life, he showed how it is at times disregarded, for example in the justification of killing civilians in wars when required for a greater good. He wryly noted "utilitarian calculus, after all, trumps the 'inviolable' principle of the sanctity of life."

Legislation should strike the balance between preserving the right to personal autonomy and protecting the rest of society from harm. A comparable example would be free speech laws which allow individuals to express views without censorship but protect society from the harm of hate speech. The correct point at which concern about harms would outweigh the commitment to free speech was difficult to derive from first principles. For assisted dying, there is a clear point where benefits outweigh harms: when the law permits assisted dying only for terminally-ill, mentally competent adults with appropriate safeguards. This would not lie at the top of a "slippery slope" as there are "clear distinctions" between terminal and non-terminal illness, between having and not having mental competence, "between assistance to die and euthanasia; and between voluntary and involuntary euthanasia." In terms of the slippery slope, well-drafted legislation would thus "apply crampons rather than skies", providing a "mighty safeguard" far better than the "present clinical, ethical, and legal fudge."

Ending, as he began, with Ann's memory he stated,

"Those who oppose a change in the law should remember Ann's unnecessarily cruel end. If it makes them think again, the suffering of this dedicated and compassionate doctor at the end of her life will be her final gift to her patients and to the wider world to which she contributed so much. We are all in her debt."

The transcript of Ray's speech is available on the website:

www.hpad.org.uk.

Questions to the Information Line

Sue Peters, Compassion in Dying's Information Line Support Officer, answers your questions about end-of-life rights between 11am and 3pm, Monday to Friday.

In August she spoke to Mrs Oliver from Devon who told Sue about her mother's experience of taking her Advance Decision to her GP:

"The doctor hadn't seen an Advance Decision before. He told us that there was a charge of £80 to sign the GP declaration, and that without the signature the Advance Decision could not be stored on my mother's notes. We explained that the GP declaration was not a legal requirement, but it would give my mother peace of mind to know that the doctor had witnessed her mental competence and that her Advance Decision could be accessed by other staff. We felt that £80 was a lot of money for someone living on a state pension."

Your doctor should not charge you to discuss your Advance Decision with you or sign the GP declaration. Doctors can charge for non-medical services such as signing insurance certificates and passport applications, but Advance Decisions do not fall into this category.

You have the legal right to refuse treatment. The GP declaration shows that your doctor has spoken to you about your decisions and made sure you understand the consequences. It also proves you had mental capacity when you made the Advance Decision. This can help other doctors who may treat you in an emergency.

Although Advance Decisions are legally binding documents, many GPs have not come across them before as they are still fairly new. This can be distressing for people trying to set out their wishes in a legally binding way, especially as they may have been diagnosed with an illness or be going into hospital. If you could spare some time to help raise awareness of Advance Decisions at your local surgery, this could really help others who may want to make an Advance Decision in the future.

If your GP attempts to charge you or refuses to sign your Advance Decision, please get in contact with us and we can advise you.

ACTION!

What happened when you spoke to your doctor about your Advance Decision? Had they seen one before? Or were they unsure of what they had to do? We want to hear about your experiences, good or bad!

Help us raise awareness at your local surgery. We can send you information leaflets and an Advance Decision toolkit for healthcare professionals to give to your doctor, which explains Advance Decisions and the law. Contact Compassion in Dying **0800 999 2434.**

Compassion in Dying is a charity that supports individuals at the end of life to have what they consider to be a good death.

We provide information and support around patient rights and choices, and conduct research into end-of-life issues.

Chair: Rowena Ironside

Chief Executive: Sarah Wootton

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Email: info@compassionindying.org.uk

Telephone: 020 7479 7731

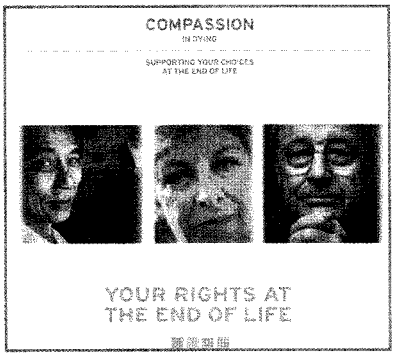
Website: www.compassionindying.org.uk

NEW! Find us on

COMPASSION IN DYING update

To contact Dignity in Dying call:
020 747 97730

New Compassion in Dying information!



We have updated the **Guide to Rights at the End of Life** for 2011. We also have new **FACTSHEETS** on topics such as:

- A quick guide to your rights in England and Wales
- Setting your wishes out in writing (Advance Decisions)
- Giving someone the power to make decisions for you (Lasting Powers of Attorney)
- Questions to ask yourself about end-of-life treatment
- Quiz - how well do you know my wishes?
- Making sure your Advance Decision is legally binding
- Taking your Advance Decision to your doctor
- Your rights in Scotland/ Northern Ireland

Please let us know if you would like us to send you any of our new information - **0800 999 2434.**

Can you help?

Do you live in London? Could you spare one day a week for the End-of-Life Rights Information Line?

Compassion in Dying is looking for a supporter who could come to our office once or twice a week to help us with the Information Line. We are particularly looking for help with administration: typing, internet research and updating databases. You wouldn't need to be a computer genius to be able to help us, but some knowledge of Microsoft Word and Excel would be useful.

If this sounds interesting please email **jo.thomas@compassionindying.org.uk** or call me on **020 7479 7731.**

Thank you!

Charitable trusts - why we could not survive without them.

Compassion in Dying is still a very new charity - even though we have managed to do a lot in such a short time. Possibly our greatest achievement to date has been the launch of the End-of-life Information Line. Since it began this summer, we have been able to help over 500 people who previously would have had nowhere to go for end-of-life advice.

We had planned this innovative service for a long time, but were only able to make it a reality because of the generosity of the Bernard Lewis Family Charitable Trust and the Rayne Foundation.

This demonstrates the importance of charitable trusts to the long-term viability of our charity and to our ability to provide services. This is why we would love to hear from you if you have connections with a charitable trust that may be able to help us with funding our work in the future.

If you are able to help, please call Jo Thomas on **020 7479 7731** or email her on **jo.thomas@compassionindying.org.uk.**

Thank you for your help.

Sue Peters

Information Line Support Officer

Jo Thomas

Charity Development Officer